

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>[Signature]</i>	55331	
O.I.P.E. CLASSIFIER	<i>[Signature]</i>	60125	4/13/00
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

☒ Rejected
☐ Allowed
☐ (Through numeral) Canceled
☐ Restricted
☐ Non-elected
☐ Interference
☐ Appeal
☐ Objected

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(Rev. 6/99)

Claim	Date	Claim	Date	Claim	Date
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If more than 150 claims or 10 actions
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